

University of California



**Lawrence Livermore
National Laboratory**

“Science in the National Interest”

Employment Application

INSTRUCTIONS FOR COMPLETING THE EMPLOYMENT APPLICATION FORMS

- ☐ Type or print in black ink
- ☐ Complete all sections fully
- ☐ Sign the Employment Application, Security Information Sheet, and Authority to Conduct Background Investigation
- ☐ Copies may be submitted, however, each copy must have an original signature and date
- ☐ Submit completed application forms to the hiring organization

Lawrence Livermore National Laboratory
Recruiting and Employment, L-725
P.O. Box 5510
Livermore, California 94551
phone: (925)423-2977
TDD: (925)422-4237
web site: <http://www.llnl.gov/jobs>

EMPLOYMENT ELIGIBILITY — Except in unusual circumstances, United States Citizenship is required for employment at LLNL in positions requiring Department of Energy security clearances. Under Federal Law, Lawrence Livermore National Laboratory may employ individuals who are legally able to work in the United States by providing documents specified in the Immigration Reform and Control Act of 1986.

EMPLOYMENT PROCESS — To be considered for Laboratory employment opportunities, send your personal resumé with a cover letter expressing your job objectives and career interests to the address listed below. Resumés may also be submitted electronically through the resumé builder on LLNL's web site listed below or as text of an email sent to hr-recruiting@llnl.gov. Your resumé will be reviewed against current openings and if there is interest, you will be contacted by the hiring organization. The hiring organization interviews those candidates with the most suitable qualifications and makes a final selection. Only individuals who are interviewed will be notified of selection or non-selection for a position. Offers of employment are made only by the Recruiting and Employment Office. Questions about job opportunities can be sent to the Recruiting and Employment Office listed below, or by email to hr-recruiting@llnl.gov. You may view current job opportunities available at our web site listed below.

LLNL
Recruiting and Employment, L-725
P.O. Box 5510
Livermore, CA 94551

phone: (925) 423-2977
TDD: (925) 422-4237
web site: www.llnl.gov/jobs

INSTRUCTIONS FOR COMPLETING THE EMPLOYMENT APPLICATION FORMS

- Type or print in black ink.
- Complete all sections fully.
- Sign the Employment Application, Security Information Sheet and Authority to Conduct Background Investigation.
- Copies may be submitted, however, each copy must have an original signature and date.
- Submit the completed application forms to the hiring organization. **Emailed applications will not be accepted.**

SECURITY INFORMATION SHEET, Pages SIS-1 through SIS-4 — Individuals being considered for employment at Lawrence Livermore National Laboratory are required to complete the Security Information Sheet. A background investigation will be conducted through the Safeguards and Security Department. The information you provide will be used to conduct this investigation.

PRIVACY NOTIFICATION FOR EMPLOYMENT APPLICATION FORMS — The State of California Information Practices Act of 1977 and the Federal Privacy Act (Public Law 93-579) require the University of California to provide you with the following information:

- The information requested on this form is for use by various Laboratory and University departments in personnel actions such as, but not limited to, consideration for employment, work assignment, benefits, and insurance programs. The information will also be transmitted to Federal and State agencies as required by law.
- It is mandatory that you furnish all of the information requested on this form with the exception of the Self-Identification form. Failure to provide such information will delay and may prevent completion of the actions for which the information is to be used.
- Laboratory and University policy and State and Federal statutes authorize the maintenance of this information. The official responsible for maintaining the information requested on this form is the Manager of Human Resources.
- Individuals have the right to review their own records in accordance with Laboratory and University policies. Information on these policies can be obtained from the Recruiting and Employment Office.

COMPLIANCE STATEMENT — The University of California, in compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 (45 CFR 86), Sections 503 and 504 of the Rehabilitation Act of 1973, the California Fair Employment and Housing Act, and the Americans With Disabilities Act of 1990 does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, sexual orientation, marital status, physical or mental disability or medical condition in any of its policies, procedures, or practices; nor does the University, in compliance with the Age Discrimination in Employment Act of 1967 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, discriminate against any employees or individuals seeking employment on the basis of their age or because they are special disabled veterans or veterans of the Vietnam era. This nondiscrimination policy covers admission, access, and treatment in University programs and activities, and application for and treatment in University employment.

In conformance with University policy and pursuant to Executive Order 11246 as amended, Section 503 of the Rehabilitation Act of 1973 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, the University of California is an affirmative action/equal opportunity employer.

Inquiries regarding the University's and the Laboratory's equal opportunity and affirmative action policies may be directed to the Recruiting and Employment Office, (925) 423-6034.

The following codes are used only for indicating fields of education as requested on the application form; they do not necessarily reflect our current hiring interests.

CODE	FIELD	CODE	FIELD	CODE	FIELD
0200	ARCHITECTURE	0700	COMPUTER SCIENCE & DATA PROCESSING	1400	LAW, PUBLIC SERVICE
0210	Architecture	0931	Computer Engineering	1404	Business Law
5361	Construction Inspection	5324	Computer Maintenance	5512	Criminal Justice Administration
0207	Design, General	0707	Computer Management	2209	Criminology
0204	Landscape Architecture	5104	Computer Operator Technologies	5507	Fire Science
0206	Urban Planning	5103	Computer Programmer Technologies	1401	Law
1000	ART	0711	Computer Programming	2105	Law Enforcement & Corrections
1002	Art	0701	Computer Science	5600	LIBERAL ARTS
1001	Fine Art	0712	Computer Science/Engineering	1600	LIBRARY SCIENCE
1015	Graphic Arts & Photography	4904	Electrical Engrg/Computer Science	1700	MATHEMATICS
0928	Graphic Design	0702	Information Sciences & Systems	1703	Applied Mathematics
1011	Photography	0710	Information Systems Management	1701	Mathematics
		0705	Systems Analysis	1702	Statistics
0400	BIOLOGICAL SCIENCES	0300	CULTURAL STUDIES	1800	MILITARY SCIENCES
0403	Bacteriology	0800	EDUCATION	0100	NATURAL RESOURCES & SCIENCE
0414	Biochemistry	0900	ENGINEERING	0101	Agriculture
0437	Biological Sciences	0902	Aeronautical Engineering	0104	Animal Science
0401	Biology, General	0936	Applied Mechanics	0118	Crop Science
0432	Biomedicine, General	0904	Architectural Engineering	0114	Forestry
0415	Biophysics	0959	Astronautical Engineering	5409	Life Science
0419	Biostatistics	0916	Ceramic Engineering	0115	Natural Resources Management
0402	Botany, General	0906	Chemical Engineering	0103	Soils Science
0417	Cell Biology	0949	Civil Engineering	0119	Water Resources
0420	Ecology	5303	Drafting	2400	OTHER PHYSICAL SCIENCES
0427	Embryology	0944	Electrical Engineering	2424	Applied Nuclear Science
0438	Environmental Studies	5329	Electrical Technology	2416	Applied Science/Engineering
0426	Environmental Toxicology	0947	Electronics	2402	Astronomy
0422	Genetics	5337	Electronics Engrg Technology	2403	Atmospheric Sciences
0418	Marine Biology	0901	Engineering, General	0950	Ceramics
0411	Microbiology	0921	Engineering Mechanics	2405	Earth Sciences
0416	Molecular Biology	0957	Fluid Dynamics	0911	Geological Engineering
0435	Natural Science	0954	Industrial Design	2404	Geology
0434	Optical Science	0913	Industrial Engineering	0912	Geophysical Engineering
0409	Pharmacology	5314	Instrumentation Technologies	2415	Hydrology/Hydraulics
0410	Physiology	5320	Laser Electro Optics Technology	2409	Material Science
0442	Plant Science	0923	Marine Engineering	2408	Metallurgy
0423	Radiobiology	0915	Materials Engineering	2417	Meteorology
0428	Radiology	0910	Mechanical Engineering	2420	Mineralogy, Petrology
0439	Zoology	0914	Metallurgical Engineering	2418	Seismology
0500	BUSINESS, COMMERCE TECHNOLOGY	0918	Mining Engineering	2500	PHYSICS
0502	Accounting	0920	Nuclear Engineering	2504	Astrophysics
0504	Banking & Finance	5316	Nuclear Technologies	2523	Atomic Physics
0521	Business Administration	0971	Optical Engineering	2526	Computational Physics
0520	Finance	0938	Power Engineering	2527	Condensed Matter Physics
0535	Human Resources	0952	Safety Engineering	2519	Experimental Physics
0516	Labor & Industrial Relations	0934	Solid Mechanics	2505	Geophysics
5018	Legal Secretary	0935	Welding Engineering	2512	High Energy Physics
0518	Management, General	1100	FOREIGN LANGUAGES	2511	Laser Physics
0539	Procurement & Contract Mgmt	1200	HEALTH PROFESSIONS	2502	Molecular Physics
0524	Public Relations	1231	Epidemiology/Occupational Health	2503	Nuclear Physics
0514	Secretarial Science	1228	Health Science	2528	Optical Physics
5011	Transportation Technologies	1232	Medical Physics	2501	Physics
2600	CHEMISTRY	1229	Medical Science	2509	Plasma Physics
2605	Analytical Chemistry	5208	Nursing, RN	2506	Solid State Physics
2516	Chemical Physics	5200	HEALTH TECHNOLOGIES	2507	Theoretical Physics
5305	Chemical Technologies	0953	Environmental Engineering	2200	SOCIAL SCIENCES
2601	Chemistry	5408	Environmental Health Technologies	2014	Behavioral Science
2607	Geochemistry	5410	Occupational Health & Safety	2015	Human Resource & Org Dev
2608	Nuclear Chemistry	0430	Radiation Protection	2207	Political Science
2604	Physical Chemistry	5348	Radiation Technology	2001	Psychology
2613	Physical Polymer Chemistry	5207	Radiologic Technologies		
0600	COMMUNICATIONS	1230	Radiological Health		
0607	Communication & Instruct Tech	5226	Safety		
0602	Journalism				
0606	Technical Writing				

Individuals wishing to be considered for employment at LLNL are requested to complete this form to comply with Equal Employment and Affirmative Action requirements. This information is requested on a strictly voluntary basis and refusal to supply it will not subject you to any adverse treatment.

Name
(Last, First, Middle) _____

☐ Male ☐ Female Birthdate
(Month/Day/Year) _____

RACE/ETHNIC HERITAGE

Please identify the appropriate ethnic category by placing an "X" in the corresponding box. Select one box only — if two or more ethnic categories are applicable, choose the one category with which you most closely identify.

- ☐ **WHITE (Not of Hispanic Origin)**
A person having origins in any of the original peoples of Europe, North Africa or the Middle East.
- ☐ **BLACK (Not of Hispanic Origin)**
A person having origins in any of the Black racial groups of Africa.
- ☐ **HISPANIC (Including Black individuals whose origins are Hispanic)**
A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- ☐ **ASIAN OR PACIFIC ISLANDER**
A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ **AMERICAN INDIAN or ALASKAN NATIVE**
A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

PRIVACY NOTIFICATION

The State of California Information Practices Act of 1977 requires the University to provide the following information to you.

The principal purpose for requesting information on this form is for personnel and affirmative action administration. University policy and State and Federal statutes authorize the maintenance of this information. Information furnished on this form will be used by various University departments for the purposes cited in these policies and statutes and will be given to State and Federal agencies if required by law.

Furnishing the information requested on this form is voluntary. There is no penalty for not completing this form.

PERSONAL DATA

Name (Last, First, Middle Initial)				Date	
Mailing Address			City		State ZIP Code
Home Telephone		Work Telephone		Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				If no, expected date of citizenship	
Are you under age 18? If under age 18 when hired, you must furnish a work permit or a copy of high school diploma. <input type="checkbox"/> Yes <input type="checkbox"/> No			Do you have the legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Other citizenships
Have you previously applied for employment at LLNL? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, indicate year		Other names used	
Have you ever been an LLNL employee? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, indicate dates and departments			
Are you a University of California Retirement Plan retiree? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, identify campus/lab			
Are you now, or have you been within the past two years, an employee of a contract or supplemental labor agency at LLNL? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, indicate company		
Do you have any near relative employed by LLNL (e.g., spouse, parents, children, brothers, sisters, step relatives and in-laws in the same relationship)? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, give name(s) and relationship		

EMPLOYMENT DATA

Job Desired		Job Number		Desired Salary <input type="checkbox"/> Hr <input type="checkbox"/> Mo	
<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Summer <input type="checkbox"/> Other Date available _____ Available for shift work? <input type="checkbox"/> Yes <input type="checkbox"/> No		How did you learn about this opportunity? <input type="checkbox"/> LLNL employee Employment Opportunities Bulletin: <input type="checkbox"/> Printed bulletin <input type="checkbox"/> LLNL Home Page <input type="checkbox"/> Advertisement: <input type="checkbox"/> Publication and date <input type="checkbox"/> Internet advertisement (indicate source) _____		<input type="checkbox"/> Recruitment event, indicate location & date _____ <input type="checkbox"/> College/Campus Recruitment <input type="checkbox"/> Referred by Faculty/Placement Office <input type="checkbox"/> Other _____	

EDUCATION AND TRAINING

Indicate the highest grade completed
☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ G.E.D. College: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

List schools you have attended beginning with the most recent. Include business, technical, military, professional, college or university.
Education: Find the appropriate code on the list of Education Codes found on the second page of this form and enter the number(s) in the box labeled **Educ Code**. If you do not find the appropriate code(s), enter the code shown in the heading of the most appropriate category (e.g., "0400" for Biological Sciences). Check the column labeled IP, if you have a degree in progress, and indicate anticipated degree in **Degree Yr**.
* If no degree, indicate ND in **Degree Yr**.

School Name	City, State	From Mo/Yr	To Mo/Yr	IP	Degree * Type	Yr	Major	Educ Code	GPA in Major	GPA Overall	Max Possible

If you attended under a different name, provide name as shown on any degree received (Last, First, Middle)	Thesis/Dissertation <input type="checkbox"/> M.S. <input type="checkbox"/> Ph.D.	Advisor's Name and Phone Number

EMPLOYMENT APPLICATION

EMPLOYMENT HISTORY

Name _____

List all employment for the past 10 years beginning with the most recent. Include military service and job-related volunteer service. Failure to include complete addresses of companies and current phone numbers for supervisors may delay consideration of your qualifications. If a supervisor is no longer with the company, indicate his/her current phone number, if possible. **Use the Additional Information area on Application-4, if necessary.**

Name of Current/Most Recent Employer		Hrs per week	Supervisor		Phone
Street Address		City	State	ZIP Code	May we contact your current/most recent employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employment Dates	Starting (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	Ending (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	
Job Title		Reason for Leaving			
If university/college faculty, indicate if paid based on: <input type="checkbox"/> 9 month contract <input type="checkbox"/> 10 month contract <input type="checkbox"/> 12 month contract					
Duties					
Name of Company		Hrs per week	Supervisor		Phone
Street Address		City	State	Zip Code	
Employment Dates	Starting (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	Ending (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	
Job Title		Reason for Leaving			
Duties					
Name of Company		Hrs per week	Supervisor		Phone
Street Address		City	State	Zip Code	
Employment Dates	Starting (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	Ending (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	
Job Title		Reason for Leaving			
Duties					
Name of Company		Hrs per week	Supervisor		Phone
Street Address		City	State	Zip Code	
Employment Dates	Starting (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	Ending (Mo/Yr) _____ Salary _____	<input type="checkbox"/> Hr <input type="checkbox"/> Mo	
Job Title		Reason for Leaving			
Duties					

Name _____

PROFESSIONAL/TECHNICAL LICENSE AND CERTIFICATES

(List relevant licenses and certificates if required for position for which you are applying)

Title of License/Certificate	Number	Issuing Agency with Phone Number	Expiration Date

WORK OR EDUCATION-RELATED REFERENCES

List individuals we may contact who know of your work or education-related experience. Do not include supervisors or former supervisors already listed in Employment History. Do not include any relatives. Include only references that can be contacted immediately, and have known you for a minimum of one year. List at least two references with current phone numbers, including area codes and extensions.

Name	Business Address	Day Phone	Work Relationship

Additional Information: Use the space below to continue answers to any of the preceding items

CERTIFICATION

I certify that the above statements, and those on any attachments to this application form, are true and complete. I understand that any falsification or omission of material facts is sufficient cause for immediate withdrawal of an employment offer or discharge. I understand that in the course of evaluating this information, the UC Lawrence Livermore National Laboratory will make such inquiries into my past employment and activities as are considered necessary.

Signature _____ Date _____

Human Resources Use Only

Representative	Department	Date

**AUTHORITY TO CONDUCT
BACKGROUND INVESTIGATION AND
RELEASE INFORMATION AND RECORDS**

I authorize Lawrence Livermore National Laboratory (LLNL) or its duly authorized agent to conduct a preliminary background investigation in accordance with the Department of Energy's (DOE) requirements. This will include verification of education and past employment, credit checks, interviews of references, criminal history checks, and such other investigations as are determined appropriate by LLNL to satisfy DOE requirements.

I request and authorize all persons who may have information relevant to this preliminary investigation to disclose such information as may be requested to LLNL or its agent. I further authorize its agent to submit such information, copy or abstract, directly to LLNL to become part of its records. I release all persons and/or organizations providing such information to LLNL or its agent from any liability on account of such disclosure.

I agree and understand that a photocopy of this authorization may serve as an original.

Print Full Name _____

Date of Birth _____ (Furnished for reasons of positive I.D.)

Social Security No. _____ (Furnished for reasons of positive I.D.)

Telephone Number

Home _____ Business _____

Signature _____

Date _____

SECURITY INFORMATION SHEET

All sections must be completed

Please print or type. Use the Additional Information area on SIS-4, if necessary. If any information is not applicable, write N/A.

Last Name		First Name		Middle Name		Driver's License Number & State	
Present Address (Street and Number)				Gender	Height	Weight	Color Eyes
City		State	ZIP Code	Birth Date (Mo/Day/Yr)		Birth Place (City, State, Country)	
From (Date)	<input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed	If married, maiden name		If not USA, was mother or father a US citizen at time of birth? <input type="checkbox"/> Yes <input type="checkbox"/> No		Citizenship	<input type="checkbox"/> Dual Citizen <input type="checkbox"/> Other
To (Date)		Social Security Number **		*Other Country Citizenship(s)			VISA Type
List all other names by which presently or previously known: Name From To				If Naturalized, give Certificate No.		Date Naturalized	
				Where Issued (City, State)			

If previously married:

Name	Date of Marriage	County	State	Date of Divorce	County	State

List all addresses for the past five years, including any foreign residence(s). Use the Additional Information area on SIS-4, if necessary.

☐ Check here if your present address has not changed in five or more years.

From Mo/Yr	To Mo/Yr	Number and Street	City	County (USA only)	State or Country	ZIP Code

Any living relatives born or presently residing in a foreign country?

☐ Yes

☐ No

If yes, give full names and enter the corresponding number code specified below. Use the Additional Information area on SIS-4, if necessary.

1 - Spouse

4 - Father

7 - Foster parent

10 - Brother

13 - Stepsister

16 - Father-in-law

2 - Former spouse(s)

5 - Stepmother

8 - Child (adopted also)

11 - Sister

14 - Half-brother

17 - Mother-in-law

3 - Mother

6 - Stepfather

9 - Stepchild

12 - Stepbrother

15 - Half-sister

18 - Guardian

Full Name	Code	Country of Birth	Present Country of Citizenship	Current Residence (city & country)

* You will be required to renounce your other citizenships before a DOE clearance will be granted.

** Pursuant to the Federal Privacy Act of 1974, you are notified that disclosure of your Social Security Number is mandatory and will be used to verify your identity. This disclosure of your Social Security Number is required by Department of Energy regulations and is authorized by Federal statute.

Name _____

- A. Have you ever been charged with or convicted of any felony offense, firearms or explosives offense or any offense(s) related to alcohol or drugs? ☐ Yes ☐ No
- B. Are there currently any charges pending against you for any criminal offense? ☐ Yes ☐ No
- C. In the last 7 years, have you been convicted of any offense(s) not listed in response A or B above? ☐ Yes ☐ No
 Include all court martial or non-judicial punishment while in the military service. Do not include traffic violations for which a fine of \$250 or less was imposed.

If you answered **yes** to questions A, B, or C above, complete each of the columns below for each case. If you answered **no** to all three questions, write "None" in each column.

1. Approximate Date	2. Charge	3. Place Where Arrested and Name of Law Enforcement Authority	4. Action Taken (Disposition)

- D. Have you ever been discharged or asked to resign from a position? If yes, give employer's name and address and describe circumstances. ☐ Yes ☐ No

- E. Are you now or have you ever been a member of any organization or group of persons which advocated or taught that the government of the United States or any state should be overturned by force, violence or any unlawful means? If Yes, explain. ☐ Yes ☐ No

- F. To your knowledge, have you ever had a security clearance or access denied, suspended or revoked by any department or agency of the Federal government? If yes, give name of employer, date, and circumstances. ☐ Yes ☐ No

- G. Do you currently have a security clearance application in process? If yes, give the name and location of the agency/company. ☐ Yes ☐ No

- H. Do you have any previous clearances granted by DOE, DOD or any other government agency? If yes, list below. ☐ Yes ☐ No

Type of Clearance	Clearance Number	Where Granted	From Mo/Day/Yr	To Mo/Day/Yr	Still Active Yes No

- I. Did you serve in the military? If yes, describe below. Attach a separate sheet if necessary. ☐ Yes ☐ No

From (Mo/Yr)		To (Mo/Yr)		Branch	Service Number	Reserve Status
Military Service						
Rank at Entry	Rank at Discharge		Type of Discharge	<input type="checkbox"/> General <input type="checkbox"/> Bad Conduct <input type="checkbox"/> Honorable <input type="checkbox"/> Medical <input type="checkbox"/> Dishonorable <input type="checkbox"/> Under Honorable Conditions <input type="checkbox"/> Undesirable <input type="checkbox"/> Other _____		
Place of Discharge						

Name _____

CHARACTER OR PERSONAL REFERENCES

List two references with current phone numbers, including area codes and extensions. Do not include supervisors or former supervisors already listed in Employment History. Do not include any relatives. Include only references that can be contacted immediately, and have known you for a minimum of one year.

Name	Business/Home Address	Day Phone	Relationship

Additional Information: Use the space below to continue answers to any of the preceding items

CERTIFICATION

I certify that the above statements are true and complete and understand that any falsification or omission of material facts is sufficient cause for immediate withdrawal of an employment offer or discharge. I understand that in the course of evaluating this information, the UC Lawrence Livermore National Laboratory will make such inquiries into my past employment and activities as are considered necessary.

Signature _____ Date _____